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CONFIRMATION NO. 9432

SERIAL NUMBER 09/166,701	FILING OR 371(c) DATE 10/05/1998 RULE	CLASS 424	GROUP ART UNIT 1628	ATTORNEY DOCKET NO. SMI-005.01
APPLICANTS ISA ODIDI, MISSISSAUGA, CANADA; AMINA ODIDI, MISSISSAUGA, CANADA; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** <div style="text-align: center;">** SMALL ENTITY **</div>				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY CANADA	SHEETS DRAWING	TOTAL CLAIMS 33 INDEPENDENT CLAIMS 6
ADDRESS 25181				
TITLE CONTROLLED RELEASE PHARMACEUTICAL DELIVERY DEVICE AND PROCESS FOR PREPARATION THEREOF				
FILING FEE RECEIVED 861	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

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